| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  09/77/,433                                  |   |   |                 |                               |              |                  |                |                        |         |                     |                            |  |
|---|---|---|-----------------|-------------------------------|--------------|------------------|----------------|------------------------|---------|---------------------|----------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |                 |                               |              |                  |                | SMALL ENTITY TYPE  OR  |         |                     | OTHER THAN<br>SMALL ENTITY |  |
| TOTAL CLAIMS  |   |   | 88              |                               |              |                  | RATI           | FEE                    | 7       | RATE                | FEE                        |  |
| FOR   |   |   | NUNGER FILED    |                               | NUMBER EXTRA |                  | BASIC          | TEE 355.00             | OR      | BASIC FEE           | ·710.00                    |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | % minus 20-     |                               | - 68         |                  | - X3 9         |                        | OR      | X\$18=              | 1224                       |  |
| INDEPENDENT CLAIMS  |   |   | 24 minus 3 =    |                               | 21           |                  | X40            |                        | 1       | X080=               | 1680                       |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |                 |                               |              |                  | - 1            |                        | OR      |                     | 1600                       |  |
| * If the difference in column 1 is less than zero, enter "O" in column 2  |   |   |                 |                               |              | +135             |                | OR                     | +270=   |                     |                            |  |
|   |   |   |                 |                               |              |                  | TOTA           | <u> </u>               | OR      | TOTAL               | 3614                       |  |
| 4 17/09 (Column 1) (Column 2) (Column 3)  |   |   |                 |                               |              |                  |                | TENIIIA                | OR      | OTHER<br>SMALL      |                            |  |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | RIGH<br>NUM<br>PREVX<br>PAID  | BER          | PRESENT<br>EXTRA | RATE           | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
| ş   | Total   | . 62                                      | Minus           | - 8                           | 8            | . —              | X\$ 9:         | -                      | OR      | X\$18=              |                            |  |
| 署   | Independent   | · 18                                      | Minus           | ··· 2                         |              | -                | X40-           |                        | OR      | X80-                |                            |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |                 |                               |              |                  | +135           | •                      | OR      | +270=               |                            |  |
| •   |   |   |                 |                               |              |                  | 101            |                        | OR      | YOTAL<br>ADDIT, FEE |                            |  |
| 1   | 10-245  | (Column 1)                                |                 | (Colum                        | nn 2)        | (Column 3)       | ADDIT. F       |                        |         | AUUI. PEE           |                            |  |
| AMENDMENT B   |   | REMADENG                                  |                 | HAGH                          |              | PRESENT          |                | ADDI-                  | 1       |                     | ADDI-                      |  |
|   |   | AFTER<br>AMENDMENT                        |                 | PREVIO<br>PAID                |              | EXTRA            | RATE           | TIONAL                 |         | RATE                | TIONAL<br>FEE              |  |
|   | Total   | . 88                                      | Minus ·         | -8                            | 8            | -                | X\$ 9.         |                        | O9      | X\$18=              |                            |  |
|   | Independent   | . 24                                      | Minus           | <b></b> 2                     | 4            | 2                | X40-           |                        | OR      | X80=                | ·                          |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |                 |                               |              |                  | +135-          |                        | OR      | +270=               |                            |  |
| 1   | 1.010   |   |                 |                               |              |                  | ADDIT, FI      |                        | ]OR     | YOTAL<br>ADDIT, FEE |                            |  |
| 1   | $1110\varphi$   | (Column 1)                                |                 | (Colum                        | nn 2)        | (Column 3)       |                |                        |         |                     |                            |  |
| NDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                 | HIGH<br>NUM<br>PREVIO<br>PAID | BER          | PRESENT<br>EXTRA | RATE           | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
|   | Total   | · 88                                      | Minus           |                               | 18           | 8                | X\$ 9=         |                        | OR      | X\$18=              |                            |  |
| AMEND   | Independent   | · 24                                      | Minus           | •••                           | 94           | •                | X40=           |                        | 1       | X80=                |                            |  |
|   | FIRST PRESE   | NTATION OF MI                             | ALTIPLE DEF     | ENDENT                        | CLAIM        |                  |                |                        | OR      |                     |                            |  |
|   | * If the entry in column 1 is less than the entry in column 2, write "V" in column 3. |   |                 |                               |              |                  |                |                        | OR      | +270=               |                            |  |
| "If the "Highest Number Previously Paid For" IN Thiss SPACE is less than 20, enter "20."  ADDIT. FEE  OR ADDIT. FEE |   |   |                 |                               |              |                  |                |                        |         |                     |                            |  |
| •   | The <b>Highest Nur</b>  | ber Previously Pal                        | d For (Total or | Independe                     | and in the   | highest numbe    | r found in the | appropriate be         | x in co | Aumo 1,             | ĺ                          |  |

plication or Docket Number